

2004

Wisconsin Composite Estimated Tax Voucher

Form **CN-ES**For Nonresident Partners or Shareholders
Using Form 1CNP or 1CNS for Calendar Year 2004

Federal Employer Identification Number		
<div style="border-bottom: 1px solid black; width: 100%; height: 1em;"></div>		
Name of Partnership or Tax-Option (S) Corporation		
Street Address		
City	State	Zip Code

VOUCHER #1

Due Date: April 15, 2004

AMOUNT OF PAYMENT

\$

Please do not staple your payment to this voucher.

Make your check payable to and mail to:Wisconsin Department of Revenue
P.O. Box 8912
Madison, WI 53708-8912

DC-046

2004

Wisconsin Composite Estimated Tax Voucher

Form **CN-ES**For Nonresident Partners or Shareholders
Using Form 1CNP or 1CNS for Calendar Year 2004

Federal Employer Identification Number		
<div style="border-bottom: 1px solid black; width: 100%; height: 1em;"></div>		
Name of Partnership or Tax-Option (S) Corporation		
Street Address		
City	State	Zip Code

VOUCHER #2

Due Date: June 15, 2004

AMOUNT OF PAYMENT

\$

Please do not staple your payment to this voucher.

Make your check payable to and mail to:Wisconsin Department of Revenue
P.O. Box 8912
Madison, WI 53708-8912

DC-046

2004

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Form **CN-ES**For Nonresident Partners or Shareholders
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Federal Employer Identification Number		
<div style="border-bottom: 1px solid black; width: 100%; height: 1em;"></div>		
Name of Partnership or Tax-Option (S) Corporation		
Street Address		
City	State	Zip Code

VOUCHER #3

Due Date: September 15, 2004

AMOUNT OF PAYMENT

\$

Please do not staple your payment to this voucher.

Make your check payable to and mail to:Wisconsin Department of Revenue
P.O. Box 8912
Madison, WI 53708-8912

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Wisconsin Composite Estimated Tax Voucher

Form **CN-ES**

For Nonresident Partners or Shareholders
Using Form 1CNP or 1CNS for Calendar Year 2004

Federal Employer Identification Number

VOUCHER #4

Due Date: January 18, 2005

Name of Partnership or Tax-Option (S) Corporation

AMOUNT OF PAYMENT

\$

Street Address

Please do not staple your payment to this voucher.

Make your check payable to and mail to:

Wisconsin Department of Revenue
P.O. Box 8912
Madison, WI 53708-8912

City	State	Zip Code
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2004

Wisconsin Composite Estimated Tax Voucher

Form **CN-ES**

For Nonresident Partners or Shareholders
Using Form 1CNP or 1CNS for Calendar Year 2004

Federal Employer Identification Number

VOUCHER #5 – EXTENSION PAYMENT

Due Date: April 15, 2005

Name of Partnership or Tax-Option (S) Corporation

AMOUNT OF PAYMENT

\$

Street Address

Please do not staple your payment to this voucher.

Make your check payable to and mail to:

Wisconsin Department of Revenue
P.O. Box 8912
Madison, WI 53708-8912

City	State	Zip Code
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DC-046